

Intelligent Monitoring Report

Report on

Cumbria Partnership NHS Foundation Trust

February 2016

To view the most recent inspection report please visit the link below.

<http://www.cqc.org.uk/Provider/RNN>

Intelligent Monitoring: Report published on 25 February 2016

CQC has developed a model for monitoring a range of key indicators about Trusts that provide Mental Health services. These indicators relate to the five key questions we will ask of all services – are they safe, effective, caring, responsive and well-led? The indicators will be used to raise questions about the quality of care. They will not be used on their own to make judgements. **Our judgements will always be based on the result of an inspection, which will take into account our Intelligent Monitoring analysis alongside local information from the public, the trust and other organisations.**

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What does this report contain?

This report presents CQC's analysis of the key indicators (which we call 'tier one indicators') for Cumbria Partnership NHS Foundation Trust. We have analysed each indicator to identify two possible levels of risk.

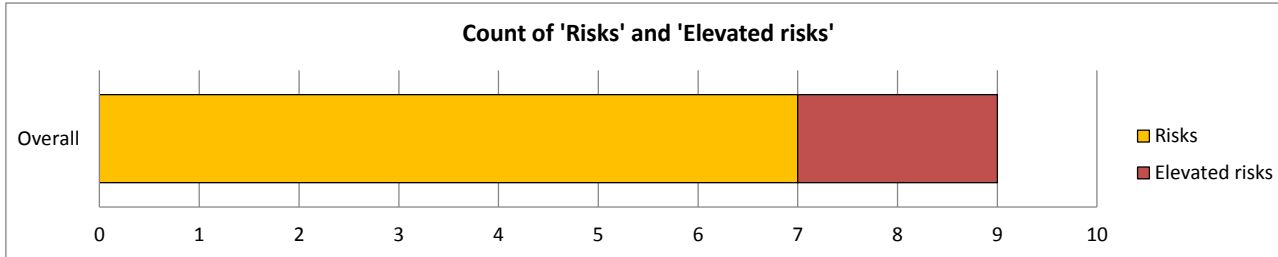
We have used a number of statistical tests to determine where the thresholds of "risk" and "elevated risk" sit for each indicator, based on our judgement of which statistical tests are most appropriate. Where an indicator has 'no evidence of risk' this refers to where our statistical analysis has not deemed there to be a risk or elevated risk. For some data sources we have applied a set of rules to the data as the basis for these thresholds - for example concerns raised by staff to CQC (and validated by CQC) are always flagged in the model.

Further details of the analysis applied are explained in the accompanying guidance document.

What guidance is available?

We have published a document setting out the definition and full methodology for each indicator. If you have any queries or need more information, please email enquiries@cqc.org.uk or use the contact details at www.cqc.org.uk/contact-us

Trust Summary



| | |
|---------------------------------|-------|
| Number of 'Risks' | 7 |
| Number of 'Elevated risks' | 2 |
| Overall Risk Score | 11 |
| Number of "No Evidence of risk" | 49 |
| Number of Applicable Indicators | 58 |
| Proportional Score | 9.65% |
| Maximum Possible Risk Score | 114 |

| | | |
|-------------------|--|---------------|
| Safe | Proportion of reported patient safety incidents that are harmful - NRLS | Risk |
| Effective | Proportion of staff appraised in last 12 months - NHS Staff Survey | Risk |
| | Proportion of staff having well-structured appraisals in last 12 months - NHS Staff Survey | Risk |
| Caring | PLACE (patient-led assessments of the care environment) score for privacy, dignity and well being - PLACE | Risk |
| Responsive | Composite indicator using analysis of delayed transfers of care where bed data is available (DTC46) and where it is not available (DTCMH01) - NHS England Delayed Transfers of Care/KH03 | Risk |
| | Composite indicator to assess bed occupancy - MHA Database/KH03 | Risk |
| Well-led | Monitor: risk rating for governance - Monitor | Elevated risk |
| | Composite indicator to assess occurrence of sampling errors or non-submission of data to the two most recent iterations of the Community Mental Health Survey - CMH Survey | Elevated risk |
| | Monitor: continuity of service rating - Monitor | Risk |

| Key Question | ID | Indicators - Source | From | To | Observed | Expected | Risk? |
|--------------|-------------|---|---|--------------|-----------------------------|--------------|---------------------|
| Safe | MHSAF07C | Potential under-reporting of patient safety incidents - NRLS/MHLDDS-HES Bridged | 01/11/2014 | 31/10/2015 | 0.07 | 0.10 | No evidence of risk |
| | MHSAFE06 | Proportion of reported patient safety incidents that are harmful - NRLS | 01/11/2014 | 31/10/2015 | 0.60 | 0.38 | Risk |
| | MHSDS_PMIN1 | Proportion of mortality among mental health inpatients aged 0-74 (death recorded in ONS) - MHLDDS-HES/ONS | 01/07/2014 | 30/06/2015 | 0.02 | 0.01 | No evidence of risk |
| | MHSDS_PMCT1 | Proportion of mortality among people in contact with community mental health services aged 0-74 (death recorded in ONS) - MHLDDS-HES/ONS | 01/07/2014 | 30/06/2015 | 0.01 | 0.01 | No evidence of risk |
| | MHSDS_PMCT2 | Proportion of mortality among people in contact with community mental health services aged 0-74 (self-harm or undetermined ONS death) - MHLDDS-HES/ONS | 01/07/2014 | 30/06/2015 | 0.00 | 0.00 | No evidence of risk |
| | MHSAFE63 | Patients that die following injury or self-harm within 3 days of being admitted to acute hospital beds - MHLDDS-HES Bridged | 01/07/2014 | 30/06/2015 | 0.00 | n/a | No evidence of risk |
| | MHSAFE64 | People that take their own lives within 3 days of discharge from hospital - MHLDDS-HES Bridged | 01/07/2014 | 30/06/2015 | 0.00 | 0.04 | No evidence of risk |
| | COM_MORT01 | Composite indicator showing trusts flagging for risk in relation to the number of deaths of patients detained under the Mental Health Act - MHA database/MHLDDS | 01/08/2014 | 31/07/2015 | n/a | n/a | No evidence of risk |
| | MHMORT01 | Trusts flagging for risk in the number of suicides of patients detained under the Mental Health Act (all ages) - MHA database/HSCIC KP90 | 01/08/2014 | 31/07/2015 | 0.00 | n/a | No evidence of risk |
| | MHMORT03 | Trusts flagging for risk in relation to the number of deaths due to natural causes of patients detained under the Mental Health Act (people aged under 75) - MHA database/HSCIC KP90 | 01/08/2014 | 31/07/2015 | 0.00 | 0.09 | No evidence of risk |
| | NHSSTAFF11 | Fairness and effectiveness of incident reporting procedures - NHS Staff Survey | 01/09/2014 | 31/12/2014 | 0.61 | 0.63 | No evidence of risk |
| | NRLS08MH | Consistency of reporting to the National Reporting and Learning System - NRLS | 01/10/2014 | 31/03/2015 | 5 months of reporting | n/a | No evidence of risk |
| | COM_CASMH | Composite of Central Alerting System (CAS): Dealing with (CAS) safety alerts in a timely way - CAS | 01/03/2009 | 31/10/2015 | n/a | n/a | No evidence of risk |
| | CASMH01A | The number of alerts which CAS stipulated should have been closed by trusts during the preceding 12 months, but which were still open on the date CQC extracted data from the CAS system - CAS | 01/11/2014 | 31/10/2015 | 0 alerts still open | n/a | No evidence of risk |
| | CASMH01B | The number of alerts which CAS stipulated should have been closed by trusts more than 12 months before, but which were still open on the date CQC extracted data from the CAS system - CAS | 01/03/2009 | 31/10/2014 | 0 alerts still open | n/a | No evidence of risk |
| | CASMH01C | Percentage of CAS alerts with closing dates during the preceding 12 months which the trust has closed late - CAS | 01/11/2014 | 31/10/2015 | < 25% of alerts closed late | n/a | No evidence of risk |
| | MHRES20 | Proportion of discharges from hospital followed up within 7 days - MHLDDS | 01/07/2014 | 30/06/2015 | 0.92 | 0.70 | No evidence of risk |
| | NHSSTAFF07 | Proportion of staff receiving health and safety training in last 12 months - NHS Staff Survey | 01/09/2014 | 31/12/2014 | 0.68 | 0.73 | No evidence of risk |
| | PLACE_MH01 | PLACE (patient-led assessments of the care environment) score for cleanliness of environment - PLACE | 04/02/2015 | 30/06/2015 | 0.98 | 0.98 | No evidence of risk |
| | SAFEGUAR01 | CQC's National Customer Service Centre (NCSC) safeguarding concerns - CQC | 01/11/2014 | 31/10/2015 | 16.00 | 29.76 | No evidence of risk |
| | MHESR01 | Proportion of registered nursing staff - ESR | 30/09/2015 | 30/09/2015 | 0.50 | 0.53 | No evidence of risk |
| | MHESR02 | Ratio of occupied beds to all nursing staff - ESR | 30/09/2015 | 30/09/2015 | 4.92 | 4.53 | No evidence of risk |
| | Effective | CMHSURA06 | Being informed: for having been told who is in charge of organising their care and services - CMH Survey | Not included | Not included | Not included | Not included |
| CMHSURA38 | | Help finding support for physical health needs: for those with physical health needs receiving help or advice with finding support for this, if they needed this - CMH Survey | Not included | Not included | Not included | Not included | Not included |
| MHCAR201 | | Proportion of patient records checked that show evidence of a physical health check on admission where the patient has been in hospital less than a year - MHA Database | 01/09/2014 | 31/08/2015 | 0.82 | 0.96 | No evidence of risk |
| MHSDS_AE1 | | Proportion of detained mental health inpatients who attend Accident and Emergency departments - MHLDDS - HES bridged | 01/07/2014 | 30/06/2015 | 0.24 | 0.21 | No evidence of risk |
| MHSDS_ACS1 | | Proportion of emergency admissions of mental health inpatients for ambulatory care sensitive conditions - MHLDDS - HES bridged | 01/07/2014 | 30/06/2015 | 0.49 | 0.35 | No evidence of risk |
| MHCAR202 | | Proportion of wards visited where there were difficulties in arranging GP services for detained patients - MHA Database | 01/09/2014 | 31/08/2015 | 0.00 | 0.13 | No evidence of risk |
| MHEFF107 | | Proportion of patient records checked where care plans showed evidence of discharge planning - MHA Database | 01/09/2014 | 31/08/2015 | 0.71 | 0.70 | No evidence of risk |
| NAS_PH02 | | Service users who had five individual cardiometabolic health risk factors monitored in the past 12 months - NAS2 | Not included | Not included | Not included | Not included | Not included |
| NAS_PH03 | | Monitoring of alcohol intake in the past 12 months - NAS2 | Not included | Not included | Not included | Not included | Not included |
| NAS_PT01 | | Has cognitive behavioural therapy ever been offered to the service user? - NAS2 | Not included | Not included | Not included | Not included | Not included |
| NAS_PT02 | | Has family intervention ever been offered to the service user? - NAS2 | Not included | Not included | Not included | Not included | Not included |
| PLACE_MH02 | | PLACE (patient-led assessments of the care environment) score for food - PLACE | 04/02/2015 | 30/06/2015 | 0.92 | 0.90 | No evidence of risk |
| NHSSTAFF04 | | Proportion of staff appraised in last 12 months - NHS Staff Survey | 01/09/2014 | 31/12/2014 | 0.76 | 0.87 | Risk |
| NHSSTAFF05 | | Proportion of staff having well-structured appraisals in last 12 months - NHS Staff Survey | 01/09/2014 | 31/12/2014 | 0.32 | 0.41 | Risk |
| NHSSTAFF06 | | Proportion of staff receiving support from immediate managers - NHS Staff Survey | 01/09/2014 | 31/12/2014 | 0.68 | 0.70 | No evidence of risk |
| MHSAFE51 | | Proportion of patient records checked where the Responsible Clinician has recorded their assessment of a patient's capacity to consent at first treatment - MHA Database | 01/09/2014 | 31/08/2015 | 0.69 | 0.67 | No evidence of risk |
| MHCAR19 | | Proportion of wards visited where there is an Independent Mental Health Advocacy (IMHA) service available - MHA Database | 01/09/2014 | 31/08/2015 | 1.00 | 1.00 | No evidence of risk |

| Key Question | ID | Indicators - Source | From | To | Observed | Expected | Risk? |
|--------------|--|--|--------------|--------------|--|---------------------|---------------------|
| | MHCAR20 | Proportion of wards visited where detained patients have direct access to the Independent Mental Health Advocacy (IMHA) service - MHA Database | 01/09/2014 | 31/08/2015 | 0.80 | 0.95 | No evidence of risk |
| | MHEFF106 | Proportion of patient records checked where there was an approved mental health practitioner (AMHP) report available - MHA Database | 01/09/2014 | 31/08/2015 | 0.73 | 0.77 | No evidence of risk |
| | MHSAF52 | Proportion of patient records checked that show evidence of discussions about rights on detention - MHA Database | 01/09/2014 | 31/08/2015 | 0.76 | 0.89 | No evidence of risk |
| Caring | CMHSURA18 | Respect and dignity: for feeling that they were treated with respect and dignity by NHS mental health services - CMH Survey | Not included | Not included | Not included | Not included | Not included |
| | CMHSURA31 | Time: for being given enough time to discuss their needs and treatment - CMH Survey | Not included | Not included | Not included | Not included | Not included |
| | PLACE_MH03 | PLACE (patient-led assessments of the care environment) score for privacy, dignity and well being - PLACE | 04/02/2015 | 30/06/2015 | 0.83 | 0.90 | Risk |
| | CMHSURA10 | Involvement in planning care: for those who have agreed what care and services they will receive, being involved as much as they would like in agreeing this - CMH Survey | Not included | Not included | Not included | Not included | Not included |
| | CMHSURA12 | Involvement in care review: for those who had had a formal meeting to discuss how their care is working, being involved as much as they wanted to be in this discussion - CMH Survey | Not included | Not included | Not included | Not included | Not included |
| | CMHSURA35 | Involvement in decisions: for those receiving medicines, being involved as much as they wanted in decisions about medicines received - CMH Survey | Not included | Not included | Not included | Not included | Not included |
| | CMHSURA42 | Involving family or friends: for NHS mental health services involving family or someone else close to them as much as they would like - CMH Survey | Not included | Not included | Not included | Not included | Not included |
| | NAS_SD01 | Was the patient provided with written information (or an appropriate alternative) about the most recent antipsychotic prescribed? - NAS2 | Not included | Not included | Not included | Not included | Not included |
| CMHSURA16 | Support: for the people seen through NHS mental health services helping them achieve what is important to them - CMH Survey | Not included | Not included | Not included | Not included | Not included | |
| Responsive | COM_BEDS | Composite indicator to assess bed occupancy - MHA Database/KH03 | 01/09/2014 | 30/09/2015 | n/a | n/a | Risk |
| | MHSAF65a | Occupancy ratio, looking at the number of patients allocated to visited wards, compared with the number of available beds - MHA Database | 01/09/2014 | 31/08/2015 | 0.85 | n/a | No evidence of risk |
| | MHSAF65c | Occupancy ratio, looking at the average daily number of available and occupied consultant-led beds open overnight - KH03 | 01/10/2014 | 30/09/2015 | 0.90 | n/a | Risk |
| | PLACE_MH04 | PLACE (patient-led assessments of the care environment) score for facilities - PLACE Survey | 04/02/2015 | 30/06/2015 | 0.87 | 0.92 | No evidence of risk |
| | CMHSURA23 | Contact: for knowing who to contact out of office hours if they have a crisis - CMH Survey | Not included | Not included | Not included | Not included | Not included |
| | CP_MH01 | Proportion of care spells where patients are discharged without a recorded crisis plan - MHLDDDS | 01/07/2014 | 30/06/2015 | 0.98 | 0.75 | No evidence of risk |
| | COM_DtcMH01 | Composite indicator using analysis of delayed transfers of care where bed data is available (DTC46) and where it is not available (DTCMH01) - NHS England Delayed Transfers of Care/KH03 | 01/07/2015 | 30/09/2015 | n/a | n/a | Risk |
| | DTC46 | The ratio of the number of patients whose transfer of care is delayed to the average daily number of occupied beds open overnight in the quarter, where the delay is attributable to the NHS or both the NHS and social care - Delayed Transfers of Care/KH03 | 01/07/2015 | 30/09/2015 | 0.11 | 0.03 | Risk |
| | DTCMH01 | Trusts where there is evidence of delayed transfers of care but no bed data available - Delayed Transfers of Care | 01/07/2015 | 30/09/2015 | No | n/a | No evidence of risk |
| | CQC_COM02 | Concerns and complaints received by CQC - CQC | 01/11/2014 | 31/10/2015 | 25.00 | 48.01 | No evidence of risk |
| | PHSOMH01 | Fully and partially upheld investigations into complaints - PHSO | 01/04/2014 | 31/03/2015 | 1.00 | 2.19 | No evidence of risk |
| | PROV_COM01 | NHS written complaints - HSCIC | 01/04/2014 | 31/03/2015 | 397.00 | 354.75 | No evidence of risk |
| MHA_COMP01 | Mental Health Act complaints received by CQC as a ratio to MHA activity - MHA Database/KP90 | 01/11/2014 | 31/10/2015 | 5.36 | n/a | No evidence of risk | |
| Well-led | COM_CPEMH | Composite Indicator: Proportion of Mental Health Act (MHA) and hospital inpatient episodes closed by the provider - MHLDDDS | 01/07/2014 | 30/06/2015 | n/a | n/a | No evidence of risk |
| | MHSDS_CPE01 | Proportion of provider closed episodes of patients detained under the Mental Health Act (MHA) - MHLDDDS | 01/07/2014 | 30/06/2015 | 0.94 | n/a | No evidence of risk |
| | MHSDS_CPE02 | Proportion of provider closed hospital inpatient episodes - MHLDDDS | 01/07/2014 | 30/06/2015 | 0.94 | n/a | No evidence of risk |
| | MONITOR_MH01 | Monitor: risk rating for governance - Monitor | 17/11/2015 | 17/11/2015 | Monitor risk rating: Subject to enforcement action | n/a | Elevated risk |
| | TDA_MH01 | NHS Trust Development Authority escalation score - TDA | Not included | Not included | Not included | Not included | Not included |
| | FLUVACMH01 | Proportion of Health Care Workers with direct patient care that have been vaccinated against seasonal influenza - Department of Health | 01/09/2014 | 28/02/2015 | 0.49 | 0.43 | No evidence of risk |
| | MHWEL137 | Proportion of days sick in the last 12 months for medical and dental staff - ESR | 01/10/2014 | 30/09/2015 | 0.02 | 0.02 | No evidence of risk |
| | MHWEL138 | Proportion of days sick in the last 12 months for nursing and midwifery staff - ESR | 01/10/2014 | 30/09/2015 | 0.05 | 0.05 | No evidence of risk |
| | MHWEL139 | Proportion of days sick in the last 12 months for other clinical staff - ESR | 01/10/2014 | 30/09/2015 | 0.05 | 0.05 | No evidence of risk |
| | MHWEL140 | Proportion of days sick in the last 12 months for non-clinical staff - ESR | 01/10/2014 | 30/09/2015 | 0.03 | 0.04 | No evidence of risk |
| | NHSSTAFF16 | Proportion of staff reporting good communication between senior management and staff - NHS Staff Survey | 01/09/2014 | 31/12/2014 | 0.23 | 0.31 | No evidence of risk |

| Key Question | ID | Indicators – Source | From | To | Observed | Expected | Risk? |
|--------------|--------------|---|------------|------------|---------------------------------------|----------|----------------------|
| | NHSSTAFF20 | Proportion of staff feeling pressure to attend work when feeling unwell in the last 3 months - NHS Staff Survey | 01/09/2014 | 31/12/2014 | 0.18 | 0.21 | No evidence of risk |
| | NTS12_MH01 | General Medical Council national training survey – trainee's overall satisfaction - GMC | 24/03/2015 | 06/05/2015 | Within the middle quartile (Q2/IQR) | n/a | No evidence of risk |
| | STASURBG01 | Proportion of staff who would recommend the trust as a place to work or receive treatment - NHS Staff Survey | 01/09/2014 | 31/12/2014 | 0.61 | 0.63 | No evidence of risk |
| | GMC_MH01 | General Medical Council enhanced monitoring - GMC | 01/06/2015 | 30/06/2015 | No concerns | n/a | No evidence of risk |
| | MHRES17 | Proportion of wards visited that have community meetings - MHA Database | 01/09/2014 | 31/08/2015 | 0.80 | 0.92 | No evidence of risk |
| | WBLow_MH01 | Snapshot of whistleblowing alerts received by CQC - CQC | 16/11/2015 | 01/02/2016 | 0.00 | n/a | No evidence of risk |
| | COM_CMHS | Composite indicator to assess occurrence of sampling errors or non-submission of data to the two most recent iterations of the Community Mental Health Survey - CMH Survey | 01/09/2013 | 30/11/2014 | n/a | n/a | Elevated risk |
| | CMHS_CURR | <i>Occurrence of sampling errors or non-submission of data relating to the current iteration of the Community Mental Health Survey - CMH Survey</i> | 01/09/2014 | 30/11/2014 | <i>Submission with errors (major)</i> | n/a | <i>Elevated risk</i> |
| | CMHS_PREV | <i>Occurrence of sampling errors or non-submission of data relating to the previous iteration of the Community Mental Health Survey - CMH Survey</i> | 01/09/2013 | 30/11/2013 | <i>Submission, no errors</i> | n/a | No evidence of risk |
| | MONITOR_MH02 | Monitor: continuity of service rating - Monitor | 17/11/2015 | 17/11/2015 | 2: material risk | n/a | Risk |

| | | | | | | | |
|---------------|-------------|---|------------|------------|------|-------|---------------------|
| Cross cutting | SYEMH | Negative comments submitted to Share Your Experience - CQC | 01/10/2014 | 30/09/2015 | 7.00 | 12.87 | No evidence of risk |
| | P_OPINIONMH | Negative comments submitted to Patient Opinion sources - Patient Opinion | 01/08/2014 | 31/07/2015 | 1.00 | 3.86 | No evidence of risk |

Suppression: We apply a strict statistical disclosure control in accordance with the HES protocol to all published data. This requires that small numbers are suppressed to prevent individuals being identified and to ensure that patient confidentiality is maintained. An asterisk (*) in the observed column indicates a suppressed value between 1 and 5.

Not applicable or N/A Values: "n/a" is used to mean either that an expected value is not relevant to a specific indicator because the indicator is rules based or the indicator does not have an observed value.

Rounding: All observed values have been rounded to two decimal places. Therefore, numbers that are less than 0.005 may be displayed on this report as '0.00'. The datasheet contains the numbers used to calculate the indicators.